Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

| Ellective December 20, 1000  |  |   |                   |   |                  |            |                    |                        |                 |                            |                                    |  |
|--|--|---|-------------------|---|------------------|------------|--------------------|------------------------|-----------------|----------------------------|------------------------------------|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |   |                   |   |                  |            | SMALL ENTITY TYPE  |                        |                 | OTHER THAN OR SMALL ENTITY |                                    |  |
| FC   | R  | NUMBI                                     | ER FILED          | NUMBER E                                    | EXTRA            | _          | RATE               | FEE                    | E               | RATE                       | FEE                                |  |
| BA   | SIC FEE  |   |                   |   |                  |            |                    | 345.00                 | OR              |                            | 690.00                             |  |
| то   | TAL CLAIMS   | 2   | minus 20          |   |                  |            | X\$ 9=             |                        | OR              | X\$18=                     | 144                                |  |
| IND  | EPENDENT CL  | AIMS /                                    | 1 2 minus 3 = * 9 |   |                  |            | X39=               |                        | OR              | X78=                       | 1/12                               |  |
| MU   | LTIPLE DEPEN   | DENT CLAIM P                              | CLAIM PRESENT     |   |                  |            |                    |                        | · •             | +260=                      | 70-                                |  |
| If the difference in column 1 is less than zero, enter "0"   |  |   |                   |   | olumn 2          |            | +130=              |                        | OR              |                            | 100                                |  |
| CLAIMS AS AMENDED - PART II  |  |   |                   |   |                  |            | TOTAL              |                        | OR              | TOTAL                      | /53                                |  |
|  | ÇI<br>Takan  | LAIMS AS A<br>(Column 1)                  | MENDED            | - PAH I II<br>(Column 2)                    |                  |            |                    | SMALL ENTITY           |                 | OTHER THAN SMALL ENTITY    |                                    |  |
|  |  | CLAIMS                                    | growth to         | HIGHEST                                     | (00.0            |            |                    | ADDI                   | •               |                            | ADDI-                              |  |
| AMENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT           |                   | NUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA |            | RATE               | ADDI-<br>TIONAL<br>FEE |                 | RATE                       | TIONAL<br>FEE                      |  |
|  | Total  | *   | Minus             | **  | =                |            | X\$ 9=             |                        | OR              | X\$18=                     |                                    |  |
|  | Independent  | •   | Minus             | ***   | =                |            | X39=               |                        | ÓR              | X78=                       |                                    |  |
|  | FIRST PRESE  |   | ULTIPLE DEP       | ENDENT CLAIM                                |                  |            | +130=              | encode Military        | OR              | +260=                      |                                    |  |
|  |  |   |                   |   |                  |            |                    |                        |                 |                            |                                    |  |
|  |  |   | •                 |   | •                | ΔΓ         | TOTAL<br>DDIT. FEE |                        | OR              | TOTAL<br>ADDIT. FEE        | ,                                  |  |
| (Column 1) (Column 2) (Column 3)   |  |   |                   |   |                  |            | JOII. I EE         |                        |                 |                            |                                    |  |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |            | RATE               | ADDI-<br>TIONAL<br>FEE | ·               | RATE                       | ADDI <sub>7</sub><br>TIONAL<br>FEE |  |
|  | Total  | •   | Minus             | **  | =                |            | X\$ 9=             |                        | OR              | X\$18=                     | ".                                 |  |
| ME   | Independent  | • * * * * * * * * * * * * * * * * * * *   | Minus             | ***   | =                |            | X39=               |                        | OR              | X78=                       |                                    |  |
|  | FIRST PRESE  | NTATION OF M                              | ULTIPLE DEF       | PENDENT CLAIM                               |                  | ┚┞         | +130=              |                        | OR              | +260=                      | ·                                  |  |
|  |  |   |                   |   |                  | <u> </u>   | TOTAL              |                        | OR              | TOTAL                      |                                    |  |
|  | -  | •   | •                 |   | •                | A          | ODIT. FEE          |                        | JOH             | ADDIT. FEE                 |                                    |  |
| •  |  | (Column 1)                                |                   | (Column 2)                                  | (Column 3)       | _          |                    |                        |                 |                            |                                    |  |
| AMENDMENT C  |  | CLAIMS                                    |                   | HIGHEST                                     |                  |            |                    | ADDI-                  | 1               |                            | ADDI-                              |  |
|  |  | REMAINING<br>AFTER<br>AMENDMENT           |                   | NUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA |            | RATE               | TIONAL<br>FEE          |                 | RATE                       | TIONAL                             |  |
|  | Total  | *   | Minus             | **  | =                |            | X\$ 9=             |                        | OR              | X\$18=                     |                                    |  |
|  | Independent  | •   | Minus             | ***   | =                | <b>↓</b> ├ | X39=               |                        | OR              | X78=                       | 1                                  |  |
| 4  | FIRST PRESE  | NTATION OF M                              | IULTIPLE DEF      | PENDENT CLAIM                               | A                | J ├        |                    |                        | l <sup>on</sup> |                            | -                                  |  |
|  |  |   |                   |   |                  |            |                    |                        | OR              | +260=                      |                                    |  |
| **   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter "2".  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2". |   |                   |   |                  |            |                    |                        |                 |                            |                                    |  |
| ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                   |   |                  |            |                    |                        |                 |                            |                                    |  |